

CITY OF WYLIE
ANIMAL SERVICES
949-100 Hensley Road
Wylie, Texas 75098
Office: (972) 442-5268 Fax: (972) 429-0496
shelia.patton@wylietexas.gov

Volunteer Application

(An Application Must Be Filled Out For Every Person Volunteering With AS, Regardless of Age)

APPLICANT INFORMATION

Name:			
Street Address:		City/State:	Zip:
Home Phone #:	Cell#	Work#	
Email:			
Occupation:		DOB:	Minor? (under 18) <input type="checkbox"/>

EMERGENCY CONTACT INFORMATION

Name:	Relationship:
Phone #:	Phone #:

ADDITIONAL INFORMATION

Do you have any allergies, physical challenges, or other limitations that may require accommodations or may restrict your volunteer experience? <input type="checkbox"/> Yes <input type="checkbox"/> NO
If YES, please explain:
How did you hear about the Animal Control Volunteer Program:
Why do you wish to volunteer for Animal Control:

AVAILABILITY

Please place an "x" if you are generally available to volunteer anytime during the following time periods. This does not commit you to the time period. This provides the Volunteer Coordinator a general idea of when you could be available, if needed.

****This does not mean you must be available the entire time period specified, just anytime during the time period****

	MON	TUE	WED	THUR	FRI	SAT	SUN
Morning (Before 12pm)							
Evening (1:30pm – 4pm)							

VOLUNTEER SIGNATURE: _____ **DATE:** _____

PARENTAL

My son/daughter has my permission to participate in Animal Services Volunteer Program. I understand my son/daughter will be expected to abide by the rules and regulations, general guidelines, and responsibilities of the Animal Services Volunteer Program.

Parent Name:	Parent Signature:
Phone #:	Date:

NAME:

I hereby agree to serve as a volunteer for the City of Wylie Animal Services (AS); a City-funded agency located at 949-100 Hensley Road, Wylie, Texas 75098 or any of its offsite locations, under the following terms and conditions:

I will perform my volunteer duties with honesty, self-discipline, and professionalism. I will maintain high standards of humane, ethical treatment towards all animal at AS.

I will donate my services to AS without contemplation of compensation or future employment.

I will adhere to sign-in and scheduling procedures set forth by the AS, and agree to notify the Volunteer Services Supervisor when I am unable to work as scheduled. I will notify the Volunteer Services Supervisor if I choose to discontinue my volunteer services at the AS.

I have current medical insurance coverage and agree to be responsible for any medical care that I must seek as a result of my volunteer service at the AS.

In the event the AS is not able to timely reach my Emergency Contact, I authorized the AS to seek emergency medical treatment for me in case of an accident, injury, or illness.

I agree to report all injuries, bites and scratches that draw blood, **immediately** to a staff person.

I am medically, physical, and psychologically fit to work safely with animals and the public.

I acknowledge that during my volunteer services, I may become privy to private or confidential information regarding, but not limited to, AS, its employees, impounded animals and customers/clients. I hereby agree to hold all such information in the strictest confidence and shall not disclose or discuss such private or confidential information with any third party.

I acknowledge receiving, reading and understanding the Volunteer Handbook and agree to adhere to the Philosophy, Policies, and Procedures set forth in the handbooks, as amended from time to time.

I have read and understand the AS Patron Conduct Policy (located on the department's website) and understand that my conduct in regards to positive communication with the department begins at time of submittal of volunteer application.

I understand the behavior of animals is sometimes unpredictable and some animals are capable of inflicting disease, serious personal injury, death or extensive property damage. I understand that my volunteer activities on behalf of the AS may place me in a hazardous situation and could result in injury to me or my personal property. I agree to indemnify, defend and hold AS and its agents, officers, directors, and employee free and harmless from all liability arising out of any and all claims, demands, losses, damages, action, judgments of every kind and description that may occur to or be suffered by me by reason of activities arising out of this Agreement.

I further agree to indemnify, defend, and hold the AS, its agents, officers, directors, and employees harmless from and against any and all claims, demands, liabilities, causes of action, damages, costs (including reasonable attorneys' fees and disbursements) and judgments made or incurred by or found against them, resulting from or arising out of: (i) any breach or default by me to any term or provision of this agreement; or (ii) any negligent or willful act or omission by me with respect to my services pursuant to this Agreement.

I understand that the AS, without notice or hearing, may terminate my volunteer position at any time, for any reason, with or without cause; provided, however, my confidentiality and indemnification obligations found in Sections 8, 9, 10, 11 and 12 of this Agreement shall survive such termination.

AGREEMENT SIGNATURE**Volunteer Signature:****Date:****Staff Signature:****Date:****VOLUNTEER JOB DESCRIPTION**

- **Minimum Commitment of 3 months**
 - **3 Shifts/Month Required**
- **Must Submit to Short Interview**
- **Orientation is Scheduled Following the Interview**
- **Minimum Age: 16 Years Old**
- **May Volunteer On or Off Site**
- **Extra Training Provided for Certain Tasks**
- **Volunteers Positions Available in Most Areas of the Shelter**
- **Job Training/Job Shadowing Available**

Please list any previous volunteer experience you have (including community and extracurricular activities):

Are you a member of any animal welfare organizations: ☐ Yes ☐ No

If yes, please describe how you participate:

Are you a member of any organizations, clubs or groups? ☐ Yes ☐ No

If yes, please list the groups, clubs or organizations you belong to:

Please list special job-related interests and skills to help us identify the best assignment match below:

Please explain briefly why you wish to volunteer with the Police Department's Animal Control Section:

Please describe what animal-related experience you possess (work, volunteer or personnel):

Please describe any special skills you have that may contribute to the volunteer program if you are selected:

How did you hear about our program?

Do you have any physical, medical or psychological limitations or disabilities (i.e. heart condition, mental illness, allergies, old injuries, epilepsy, etc.)? ☐ Yes ☐ No

If yes, please explain:

Although we make every effort to see that all the animals in our care are adopted, redeemed or rescued, there are instances when an animal becomes unadoptable and is euthanized. How do you feel about this?

Have you ever been charged with a crime? ☐ Yes ☐ No

If yes, please explain:

Volunteering for Animal Control is not only animal related. It also involves constant contact with the general public and Animal Control staff. How do you feel about interacting with all types of people?

Are you comfortable taking directions from others? ☐ Yes ☐ No

If no, explain:

Do you object to:

(1) A background investigation? ☐ Yes ☐ No

(2) Your photograph on record? ☐ Yes ☐ No

Do you agree to abide by the policies and procedures presented to you during orientation and any subsequent training? ☐ Yes ☐ No

Do you agree to be supervised by the staff of Animal Control? ☐ Yes ☐ No